

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	02/19
2	✓	✓	02/19
3	✓	✓	02/19
4	✓	✓	02/19
5	✓	✓	02/19
6	✓	✓	02/19
7	✓	✓	02/19
8	✓	✓	02/19
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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